

| POSITION                  | INITIALS  | ID NO.       | DATE            |
|---------------------------|-----------|--------------|-----------------|
| FEE DETERMINATION         | <i>PH</i> | <i>70891</i> | <i>6/29</i>     |
| O.I.P.E. CLASSIFIER       |           | <i>49</i>    | <i>7/5/00</i>   |
| FORMALITY REVIEW          | <i>PH</i> | <i>60245</i> | <i>8-31-01</i>  |
| RESPONSE FORMALITY REVIEW |           | <i>60245</i> | <i>11-11-01</i> |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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